



**New Hampshire Department of Health and Human Services
Chiller Routine Inspections and Preventative Maintenance
#RFP-2018-NHH-02-CHILL**

ADDENDUM #4

On February 10, 2017, the New Hampshire Department of Health and Human Services published a request for applications, requesting applications from vendors who are qualified for Chiller Routine Inspections and Preventative Maintenance.

The Department is publishing this addendum to:

- 1. Delete and replace Appendix F, with Appendix F-Addendum #4:**

APPENDIX F-Addendum #4 – Bid Submittal and Vendor Qualification Letter

State of New Hampshire
Department of Health and Human Services
Contract Unit

Date: January 12, 2017
Request for Proposal (RFP) RFP-2018-NHH-02-CHILL
129 Pleasant Street, Concord, NH 03301

Date: _____ Company Name: _____

Address: _____

To (Point of Contact):

Shannon DuBreuil

Telephone: (603) 271-9615

Email: Shannon.DuBreuil@dhhs.nh.gov

Dear Ms. DuBreuil:

[Insert name of signor: _____], on behalf of [insert name of business submitting the Proposal _____] (collectively referred to as "Vendor") hereby submits an offer as contained in the written Proposal submitted herewith ("Proposal") to the State of New Hampshire in response to Request for Proposal RFP-2018-NHH-02-CHILL for the purpose of providing Chiller Routine Inspections and Preventative Maintenance at the Department of Health and Human Services New Hampshire Hospital's Acute Psychiatric Services Building, 36 Clinton Street in Concord, NH at the price quoted herein in complete accordance with RFP-2018-NHH-02-CHILL.

_____ Is authorized to legally obligate _____
Print Signor Name Print Company Name

Vendor attests to the fact that:

1. The Vendor has reviewed and agreed to be bound by RFP-2018-NHH-02-CHILL.
2. The Vendor has not altered any of the language or other provisions contained in the RFP document.
3. The Vendor accepts terms, conditions, and general instructions stated in Mandatory Business Specifications, Contract Terms, Conditions and Penalties.
4. The Vendor confirms that Appendix A, Exceptions to Terms and Conditions is included in the proposal.
5. The Bid is effective for a period of two hundred forty (240) days from the Bid submission deadline of February 7, 2017.
6. The prices the Vendor has quoted in the Bid were established without collusion with other vendors.
7. The Vendor has read and fully understands this RFP.

Vendor's official point of contact is: _____

Telephone: _____ Email: _____

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QUALIFICATION OF VENDOR

The Vendor must be able to demonstrate that they can provide the services listed within the Request for Proposals. The Vendor shall provide as references at least two (2) clients for which they have provided Chiller Routine Inspections and Preventative Maintenance within the State of New Hampshire over the period of the last two (2) years.

Name of Client: _____ Contact Person: _____

Phone Number: _____

Name of Client: _____ Contact Person: _____

Phone Number: _____

VENDOR NAME AND ADDRESS

VENDOR CONTACT PERSON

TEL. # _____ FAX # _____ EMAIL: _____

VENDOR'S REMITTANCE ADDRESS

TEL. # _____ FAX # _____ EMAIL: _____

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VENDOR'S COST BID:

Monthly Service

Cost: \$_____per visit

Semi Annual Service

Cost: \$_____per visit

Scheduled Repair Service

Cost: \$_____per hour with a _____ hour minimum.

Emergency Services Calls (during normal business hours*):

Cost: \$_____per hour with a _____ hour minimum.

Emergency Service Calls (outside of normal business hours*):

Cost: \$_____per hour with a _____ hour minimum.

**Normal business hours are from 7:00 am to 3:30 PM, Monday through Friday, excluding holidays for State Employees (<http://www.admin.state.nh.us/hr/index.html>).*

Authorized Signor's Name Printed: _____

Authorized Signor's Signature: _____

COUNTY: _____

STATE: _____

NOTARY PUBLIC/JUSTICE OF THE PEACE

On the ____ day of _____, 2014, there appeared before me, the State and County foresaid a person who satisfactorily identified him/herself as _____ and acknowledge that he/she executed this document indicated above. In witness thereof, I hereunto set my hand and official seal.

(Notary Public/Justice of the Peace)

My Commission expires:

(Date)